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<b>FEE TRANSMITTAL</b> <b>for FY 2003</b> <small>Effective 01/01/2003, Patent fees are subject to annual revision.</small>		<b>Complete if Known</b>																																																																																																																																																																																																																																																			
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<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Filing Date	October 31, 2001																																																																																																																																																																																																																																																		
		First Named Inventor	Takahiro Okada																																																																																																																																																																																																																																																		
		Examiner Name	Not Yet Assigned																																																																																																																																																																																																																																																		
TOTAL AMOUNT OF PAYMENT (\$)		930.00	Attorney Docket No.	M1071.1495/P1495																																																																																																																																																																																																																																																	
<b>METHOD OF PAYMENT</b> (check all that apply)		<b>FEE CALCULATION</b> (continued)																																																																																																																																																																																																																																																			
<input type="checkbox"/> Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None <input type="checkbox"/> Deposit Account Deposit Account Number: 50-2215 Deposit Account Name: Dickstein Shapiro Morin & Oshinsky LLP The Director is hereby authorized to: (check all that apply) <input type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Credit any overpayments <input checked="" type="checkbox"/> Charge any additional fee(s) during the pendency of this application <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.																																																																																																																																																																																																																																																					
<b>1. BASIC FILING FEE</b>		<b>3. ADDITIONAL FEES</b>																																																																																																																																																																																																																																																			
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Name (Print/Type)	Richard LaCava	Registration No. (Attorney/Agent)	41,135	Telephone	(212) 896-5484																																																																																																																																																																																																																																																
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